The Progress of the Vermont Health Information Exchange (VHIE)

VITL and the State have partnered to build the VHIE in stages:

- 1. Help providers implement Electronic Health Records
- 2. Create a statewide network to gather health data
- 3. Build a platform for that data to be used by unrelated providers as they care for patients
- 4. Use the data for analysis that supports health reform and health system measurement

1. How VHIE Has Helped Providers implement Electronic Health Records (EHR) (% using EHR):

Hospitals: 100%

Primary Care Practices: 97%

FQHCs: 100%Home Health: 100%DAs / SSAs: 100%

Long Term Care: 100%

Focus for Improvement: Independent Providers - % EHR uptake not as high

VITL also supports practices in meeting Meaningful Use measures. Meaningful use is using certified EHR technology to: Improve quality, safety, efficiency, and reduce health disparities. In partnership with the State of Vermont's EHR Incentive Program, our consulting services may include a readiness assessment, workflow or technical adaptations, and clarifying the attestation or measurement criteria.

2. How the VHIE Network Is Gathering Data From Providers:

- Types of Data Contributors
 - 100% of hospitals are contributing data to the VHIE
 - o 78% of Primary Care Practices are contributing data to the VHIE
 - o 99% of Home Health and Hospice (VNA) are contributing data
 - As a result, 92% of Vermonters have data in the VHIE
 - Focus for Improvement: Less than 14% of all other providers are contributing data to the VHIE
- Types of Data Contributed
 - Laboratory, Radiology and Transcribed reports All VT hospitals + 2 NH hospitals + 3 external labs
 - Clinical Care Summaries 127 hospital and practices
 - Admissions, Discharges, and Transfers 196 hospitals and practices
 - o Immunizations 216 hospital and practice data transmitted directly to VDH

3. How Providers Can Use VHIE's Platform To Care For Individual Patients:

A provider's ability to use the VHIE to care for a particular patient depends upon that patient consenting to have their data accessible by providers in Vermont.

- 30% of Vermonters have consented so far (175,165 individuals)
 - o 19% at time of Act 73 report
 - o Implemented electronic consent from EHRs
 - 95% of patients when asked will opt-in
- VITLAccess (VHIE Provider Portal) is in use by 169 hospitals and practices and 2,864 individual users
- Since 2015, patient data has been queried over 750,000 times by users

- Over 2,000 patient queries performed in January 2018, a 30% increase since the Act 73 report
- VHIE Results delivers patient data (e.g., laboratory, radiology, transcription) to providers' EHR
 - o 143,000 result messages delivered to 40 practices in January alone
 - o 10% increase since Act 73 report
- VHIE connects to Veteran Affairs Lifetime EHR
 - Over 300 requests/month
 - VHIE has shared over 500 clinical summaries since HTS report
- Direct Secure Messaging (VITLDirect)
 - o 3000 messages exchanged/month by 200 users
 - o 50,000 messages exchanged to date (e.g., discharge instructions, sensitive patient care info)
- Event Notification Data Service
 - 6,000 notifications/month sent to 312 subscribers (PatientPing)
 - Now sending to OneCareVermont's Care Navigator care management system
- Focus for Improvement: VHIE to connect to additional Vermont Provider EHRs
 - Working with UVM MC to integrate with PRISM
 - VHIE to connect to other State, Vendor, Regional networks "network of networks"

4. How VHIE Data Can Be Used For Analysis That Supports Health Reform and Health System Measurement

- VHIE data analysis reduces reliance on chart abstraction techniques to gather data for analytics
- VHIE data extracts can assist programs like the Blueprint for Health of Bi-State's Improvement Model
- VHIE data is being used to measure outcomes on key health reform metrics
- Of the All Payer ACO Model measures, three measures are reliant on clinical data from the VHIE
- Focus for Improvement: Currently there is a 83% match rate of patient clinical messages to OneCare Vermont Medicaid claimant records